

CLAIMS ONLY

Application Number

10707319

Filing Date

Applicant(s)

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1.						
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50.						
Total Indep			5			
Total Depend			19			
Total Claims			24			

* May be used for additional claims or amendments

51	Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep						
Total Depend						
Total Claims						